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DATE MAILED: 07/20/2005

APPLICATION NO.	FI	LING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/897,765	. (07/02/2001	Sergei Nikolaevich Kryukov	1202.021US1	1202.021US1 8208	
45346	7590	07/20/2005		EXAMINER		
		EDGINGTON, LLO	KASSA, YOSEF			
1660 LINCOLN STREET, SUITE 3050 DENVER, CO 80264 ART U			ART UNIT	PAPER NUMBER		
,				2625	,	

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)	
Interview Summary	09/897,765	KRYUKOV ET A	L
mico. view Gammary	Examiner	Art Unit	
	YOSEF KASSA	2625	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>YOSEF KASSA</u> .	(3)		
(2) <u>RICHARD L. HOLZER, Jr</u> .	(4)		
Date of Interview: <u>07/01/2005</u> .			
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	2)☐ applicant's representative	e)	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed:			
Identification of prior art discussed: Smith (5,454,051).			
Agreement with respect to the claims f)⊠ was reached. g)□ was not reached. h)□ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Discussed correction reg</u> <u>first paragraph of the Office Action line 5 Chang et al (6,72) second paragraph the rejection should be changed to Fairh This change was agreed with the applicant's and made a region of the property of the property</u>	uirement on the Office Action 8,414) should be changed to Sourst (5,097,322), and further	<u>mailed on 12/29</u> Smith (5,454,051	/2004, on the), and the
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w	reed would rendo ould render the	er the claims claims
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR FORM, WHICHEVER IS LATER, TO FILE A STATEMENT Summary of Record of Interview requirements on reverse si	last Office action has already THE MAILING DATE OF THIS OF THE SUBSTANCE OF TH	been filed, APP S INTERVIEW S	LICANT IS UMMARY
Examiner Note: You must sign this form unless it is an	Sarre		
Attachment to a signed Office action.	Examiner's sign	ature, if required	

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Examiner's signature, if required